Fill in this information t	o identify your case:	
Debtor 1	Eric Jayson Moyer	
Debtor 2 (Spouse, if filing)	Diana Moyer	
United States Bankrup	tcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
Case number 1:18-BK-01588-HWV		Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment					
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse	
	If you have more than one job,	Employment status*	■ Em	ployed	■ Employed	
	attach a separate page with information about additional	Limployment status	☐ Not employed		☐ Not employed	
	employers.	Occupation	laboro	per	Bartender	
	Include part-time, seasonal, or self-employed work.	Employer's name	Librar	ndi Machine Shop, Inc.		
	Occupation may include student or homemaker, if it applies.	Employer's address		port Road etown, PA 17057		
		How long employed th	nere?	19 years		
				*See Attachment for Additi	onal Employment Information	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1			For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	3,292.44	\$	681.93		
3.	Estimate and list monthly overtime pay.	3.	+\$_	637.66	+\$	0.00		
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	3,930.10	\$	681.93		

Official Form 106l Schedule I: Your Income page 1

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Main Document

Case number (if known)

1:18-BK-01588-HWV

			For Debtor 1			r Debtor 2 or n-filing spouse		
	Copy line 4 here	. 4.	\$_	3,930.10	\$_	681.93		
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	771.33	\$	86.90		
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00		
	5d. Required repayments of retirement fund loans	5d.	\$	191.90	\$	0.00		
	5e. Insurance	5e.	\$	268.07	\$	0.00		
	5f. Domestic support obligations	5f.	\$	0.00	\$	0.00		
	5g. Union dues	5g.	\$_	0.00	\$_	0.00		
	5h. Other deductions. Specify: Employee Loan	5h.+	\$	20.83	+ \$_	0.00		
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,252.13	\$_	86.90		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,677.97	\$_	595.03		
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
	8b. Interest and dividends	8b.	\$	0.00	\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	ent 8c.	\$	0.00	\$	0.00		
	8d. Unemployment compensation	8d.	\$	0.00	\$	0.00		
	8e. Social Security	8e.	\$	0.00	\$	455.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	\$	0.00		
	8g. Pension or retirement income	8g.	\$	0.00	\$	0.00		
	8h. Other monthly income. Specify: Overwithholding Adj.	8h.+	\$_	83.83	+ \$_	0.00	7	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	83.83	\$_	455.00		
10.	Calculate monthly income. Add line 7 + line 9.	10. \$		2,761.80 + \$	1.	050.03 = \$	3,811.83	
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	-					-,-	
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceapplies						3,811.83	
	арриос						,	
13.	Do you expect an increase or decrease within the year after you file this for	rm?				Combin monthly	ed income	
13.	■ No.							
	Yes. Explain:							

Main Document

Debtor 1 Eric Jayson Moyer
Debtor 2 Diana Moyer

Case number (if known) 1:18-BK-01588-HWV

Official Form B 6I Attachment for Additional Employment Information

Spouse		
Occupation		
Name of Employer	VFW Post 1718 Home Association	
How long employed		
Address of Employer	Laurel E. Stone	
	18 Laurel Street	
	Harrisburg, PA 17109	

Main Document Page 3 of 5

page 3

Filli	n this informat	tion to identify yo	our case:							
Debt	tor 1	Eric Jayson N	Moyer			Ch	eck if	this is:		
							An	amended filing		
Debt	tor 2	Diana Moyer							ving postpetition chapt	er
(Spo	ouse, if filing)						13 6	expenses as of	the following date:	
Unite	ed States Bankru	uptcy Court for the	: MIDDLE	E DISTRICT OF PENNSYL	_VANIA		MM	I / DD / YYYY		
		18-BK-01588-l	HWV							
(If kn	nown)									
Of	ficial Fo	rm 106J								
		J: Your	Exper	ises					1	12/15
info	rmation. If me		eded, atta	If two married people ar ch another sheet to this n.						
Part		ibe Your House	∌hold							
1.	Is this a join									
	□ No. Go to									
	■ Yes. Does	s Debtor 2 live	in a separa	ate household?						
	■ No □ Ye	_	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of D	ebtor 2	2.		
2.	Do you have	dependents?	= N.							
۷.	•	•	_							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents r								☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
2	D		_						☐ Yes	
3.	expenses of	enses include people other to your depende	han $_{\square}$	No Yes						
Part		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
Incl	ude expenses	s paid for with	non-cash	government assistance it	f vou know					
the		i assistance an		cluded it on Schedule I: Y		- 1		Your expe	enses	
4	The rental of	r hama awnara	hin ovnon	ses for your residence. In	a aluda firat martaana					
4.		d any rent for th			iciude ilist mortgage		\$		0.00	
	If not include	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00	
			•	ıpkeep expenses		4c.	· : —		0.00	
_		owner's associat				4d.			0.00	
5	Additional m	nortgage navm	ents for vo	our residence, such as hor	me equity loans	5	\$		0.00	

Official Form 106J Schedule J: Your Expenses page 1

	Deb	tor 1	Eric Jays	son Moyer						
6a. Electricity, heat, natural gas 6b. School	Deb	tor 2	Diana M	oyer	Case number (if kno		1:18-BK-01588-HWV			
6a Electricity, heat, natural gas 6b \$0.00	6 Utilities									
B. Water, sewer, garbage collection B. S. C. C. C. C. C. C. C	0.			v. heat, natural das	6a	. \$	200.00			
Sec. Telephone, cell phone, Internet, satellite, and cable services 6d. \$ 0.000				•		· -				
6 d. Other: Specify: Food and housekeeping supplies Childcare and children's education costs Childcare and children's e						·				
7. Food and housekeeping supplies 7. \$ 400.00			•			·				
Clothing laundry, and dry cleaning 9	7.			•		· ·				
10 10 10 10 10 10 10 10	8.									
10. Personal care products and services 10. \$ 20.00	9.	Cloth	hing, laund	dry, and dry cleaning	9	. \$				
11. Medical and dental expenses 11. \$ 50.00	10.		•		10	. \$				
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 254.00					11	. \$				
13. Enterfainment, clubs, recreation, newspapers, magazines, and books 13. \$ 40.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 86.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 70.00 15d. Other insurance. Specify: 15d. \$ 0.00 15d. Other insurance. Specify: 15d. \$ 0.00 15d. Other insurance Specify: 15d. \$ 0.00 15d. Other insurance. Specify: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other, Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 19. Other payments you make to support others who do not live with you. 19c. Other payments you make to support others who do not live with you. 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly net income. 23d. Calculate your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses fro	12.	Tran	sportation	Include gas, maintenance, bus or train fare.						
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15c. Vehicle insurance										
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